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CONFIRMATION NO. 9590

<b>SERIAL NUMBER</b> 10/645,913	<b>FILING OR 371(c) DATE</b> 08/21/2003 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1644	<b>ATTORNEY DOCKET NO.</b> RCHP-106US1
<b>APPLICANTS</b> Michael M. Grunstein, Merion, PA; Hakon Hakonarson, Reykjavic, ICELAND;				
<b>** CONTINUING DATA *****</b> This application is a CON of 09/261,104 03/03/1999 PAT 6,630,140 which claims benefit of 60/077,398 03/10/1998				
<b>** FOREIGN APPLICATIONS *****</b> none				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 11/14/2003				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <input type="checkbox"/> yes <input checked="" type="checkbox"/> no		<b>STATE OR COUNTRY</b> PA	<b>SHEETS DRAWING</b> 15	<b>TOTAL CLAIMS</b> 43
<b>ADDRESS</b> 23122		<b>INDEPENDENT CLAIMS</b> 5		
<b>TITLE</b> Composition and methods for treatment asthma				
<b>FILING FEE RECEIVED</b> 731	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	